



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

\*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 6748

|                                    |   |                     |                               |                                       |
|------------------------------------|---|---------------------|-------------------------------|---------------------------------------|
| <b>SERIAL NUMBER</b><br>10/507,480 | <b>FILING OR 371(c) DATE</b><br>01/12/2005<br><b>RULE</b> | <b>CLASS</b><br>379 | <b>GROUP ART UNIT</b><br>2614 | <b>ATTORNEY DOCKET NO</b><br>2466-131 |
|------------------------------------|---|---------------------|-------------------------------|---------------------------------------|

## APPLICANTS

Olle Cederberg, Hagersten, SWEDEN;  
 Per Almstedt, Hagersten, SWEDEN;  
 Mats Sjodin, Linkoping, SWEDEN;  
 Kenth Skoglund, Linghem, SWEDEN;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/SE02/00450 03/12/2002

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

|  |   |                            |                     |                        |                         |
|--|---|----------------------------|---------------------|------------------------|-------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br><u>R. Singh</u> Initials | STATE OR COUNTRY<br>SWEDEN | SHEETS DRAWING<br>5 | TOTAL CLAIMS<br>8<br>7 | INDEPENDENT CLAIMS<br>1 |
|--|---|----------------------------|---------------------|------------------------|-------------------------|

## ADDRESS

23117

## TITLE

Interface Device

|                                    |   |   |
|------------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>1296 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees   |
|                                    |   | <input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. o time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |